Brightwater Birralee

Performance Report

155 Odin Road
INNALOO WA 6018
Phone number: 08 9445 6600

**Commission ID:** 7232

**Provider name:** Brightwater Care Group Limited

**Assessment Contact - Site date:** 1 November 2021

**Date of Performance Report:** 01 December 2021

# Performance report prepared by

Michelle Glenn, delegate of the Aged Care Quality and Safety Commissioner.

# Publication of report

This Performance Report **will be published** on the Aged Care Quality and Safety Commission’s website under the Aged Care Quality and Safety Commission Rules 2018.

# Overall assessment of this Service

|  |  |
| --- | --- |
| **Standard 3 Personal care and clinical care** |  |
| Requirement 3(3)(a) | Compliant |
| **Standard 4 Services and supports for daily living** |  |
| Requirement 4(3)(b) | Compliant |
| **Standard 8 Organisational governance** |  |
| Requirement 8(3)(d) | Compliant |

# Detailed assessment

This performance report details the Commissioner’s assessment of the provider’s performance, in relation to the service, against the Aged Care Quality Standards (Quality Standards). The Quality Standard and requirements are assessed as either compliant or non-compliant at the Standard and requirement level where applicable.

The report also specifies areas in which improvements must be made to ensure the Quality Standards are complied with.

The following information has been taken into account in developing this performance report:

* the Assessment Team’s report for the Assessment Contact - Site; the Assessment Contact - Site report was informed by a site assessment, observations at the service, review of documents and interviews with consumers, representatives, staff and management
* the provider’s response to the Assessment Contact - Site report received 19 November 2021 indicating the findings have been accepted
* the Performance Report dated 16 August 2021 for the Site Audit conducted 09 June 2021 to 11 June 2021.

# STANDARD 3 Personal care and clinical care

### Consumer outcome:

1. I get personal care, clinical care, or both personal care and clinical care, that is safe and right for me.

### Organisation statement:

1. The organisation delivers safe and effective personal care, clinical care, or both personal care and clinical care, in accordance with the consumer’s needs, goals and preferences to optimise health and well-being.

## Assessment of Standard 3

The Assessment Team assessed Requirement (3)(a) in relation to Standard 3 Personal care and clinical care and have recommended the Requirement met. All other Requirements in this Standard were not assessed, therefore, an overall rating of the Standard is not provided.

I have considered the Assessment Team’s findings and the evidence documented in the Assessment Team’s report and based on this information, I find Brightwater Care Group Limited, in relation to Brightwater Birralee, Compliant with Requirement (3)(a) in Standard 3 Personal care and clinical care. I have provided reasons for my finding in the specific Requirement below.

### Assessment of Standard 3 Requirements

### Requirement 3(3)(a) Compliant

*Each consumer gets safe and effective personal care, clinical care, or both personal care and clinical care, that:*

1. *is best practice; and*
2. *is tailored to their needs; and*
3. *optimises their health and well-being.*

The Assessment Team provided the following evidence and information collected through interviews, observations and documents which are relevant to my finding in relation to this Requirement:

* The service demonstrated that each consumer gets safe and effective personal and clinical care that optimises their health and well-being and is in line with national guidelines and best practice where evidence is available.
* Consumers and representatives sampled confirmed consumers are provided with personal and clinical care that is safe and provided in a manner they have requested. Additionally, consumers and representatives expressed satisfaction with the care consumers receive in relation to management of wounds and pain.
* Consumer care plans are developed from information gathered on entry from a range of sources, including discharge summaries, aged care assessments and information from the consumer and nominated representatives.
* Two consumer files had not been updated in line with their changing needs relating to sensory deficits and health and well-being.
* A representative for one of the consumers indicated they were satisfied the care the consumer receives meets their needs and staff were very kind and supportive of the consumer’s wishes.
* Care files sampled demonstrated appropriate assessment and provision of care related to restrictive practices, skin integrity and pain. Policies and procedures relating to these aspects of care are available to guide staff practice.

For the reasons detailed above, I find Brightwater Care Group Limited, in relation to Brightwater Birralee, Compliant with Requirement (3)(a) in Standard 3 Personal care and clinical care.

# STANDARD 4 Services and supports for daily living

### Consumer outcome:

1. I get the services and supports for daily living that are important for my health and well-being and that enable me to do the things I want to do.

### Organisation statement:

1. The organisation provides safe and effective services and supports for daily living that optimise the consumer’s independence, health, well-being and quality of life.

## Assessment of Standard 4

The Assessment Team assessed Requirement (3)(b) in Standard 4 Services and supports for daily living as part of the Assessment Contact. All other Requirements in this Standard were not assessed and, therefore, an overall rating of the Standard is not provided.

The purpose of the Assessment Contact was to assess the performance of the service in relation to Requirement (3)(b) in Standard 4. This Requirement was found Non-compliant following a Site Audit conducted 09 June 2021 to 11 June 2021 where it was found the service did not demonstrate that each consumer’s spiritual needs were being met. The Assessment Team’s report provided evidence of actions taken to address deficiencies identified at the Site Audit and have recommended Requirement (3)(b) met.

I have considered the Assessment Team’s findings and the evidence documented in the Assessment Team’s report and based on this information, I find Brightwater Care Group Limited, in relation to Brightwater Birralee, Compliant with Requirement (3)(b) in Standard 4 Services and supports for daily living. I have provided reasons for my findings in the specific Requirement below.

## Assessment of Standard 4 Requirements

### Requirement 4(3)(b) Compliant

*Services and supports for daily living promote each consumer’s emotional, spiritual and psychological well-being.*

The service was found Non-compliant with Requirement (3)(b) following a Site Audit conducted 09 June 2021 to 11 June 2021 where it was found the service did not demonstrate that each consumer’s spiritual needs were being met. The Assessment Team’s report provided evidence of actions taken to address deficiencies identified, including, but not limited to:

* Implemented a specific spiritual assessment, completed on entry or when the care plan is developed, to tailor lifestyle care and services to meet consumers’ spiritual needs, goals and preferences.
* Consumers’ needs, goals and preferences for spiritual support are captured through the personal profile and Social/emotional and well-being care domain.
* All consumers have been reassessed for practicing and non-practicing spiritual/religious pursuits and faiths.

The Assessment Team provided the following evidence and information collected through interviews, observations and documents which are relevant to my finding in relation to this Requirement:

* Overall, consumers indicated they can acknowledge and observe sacred, cultural and religious practices as appropriate and celebrate days that are meaningful to their culture or religion.
* Entry documents include a social history which enables consumers to share information about their background and pre-admission lifestyle, including information about cultural and spiritual needs and goals.
* Care plans sampled generally included current information about consumers’ emotional, spiritual or psychological well-being. Staff described the nature of emotional, spiritual and psychological support provided to sampled consumers in line with information documented in care files.
* The activity program demonstrated sacred, cultural and religious practices are observed, as appropriate, enabling consumers to celebrate days that are meaningful to their culture or religion.
* Community visitors assist with church services, special events/activities and spend individual time with some consumers who require it.

For the reasons detailed above, I find Brightwater Care Group Limited, in relation to Brightwater Birralee, compliant with Requirement (3)(b) in Standard 4 Services and supports for daily living.

# STANDARD 8 Organisational governance

### Consumer outcome:

1. I am confident the organisation is well run. I can partner in improving the delivery of care and services.

### Organisation statement:

1. The organisation’s governing body is accountable for the delivery of safe and quality care and services.

## Assessment of Standard 8

The Assessment Team assessed Requirement (3)(d) in Standard 8 Organisational governance as part of the Assessment Contact. All other Requirements in this Standard were not assessed and, therefore, an overall rating of the Standard is not provided.

The purpose of the Assessment Contact was to assess the performance of the service in relation to Requirement (3)(d) in Standard 8. This Requirement was found Non-compliant following a Site Audit conducted 09 June 2021 to 11 June 2021 where it was found the service did not demonstrate effective risk management systems and practices, specifically in relation to identifying and responding to abuse and neglect of consumers. The Assessment Team’s report provided evidence of actions taken to address deficiencies identified at the Site Audit and have recommended Requirement (3)(d) met.

I have considered the Assessment Team’s findings and the evidence documented in the Assessment Team’s report and based on this information, I find Brightwater Care Group Limited, in relation to Brightwater Birralee, Compliant with Requirement (3)(d) in Standard 8 Organisational governance. I have provided reasons for my findings in the specific Requirement below.

## Assessment of Standard 8 Requirements

### Requirement 8(3)(d) Compliant

*Effective risk management systems and practices, including but not limited to the following:*

1. *managing high impact or high prevalence risks associated with the care of consumers;*
2. *identifying and responding to abuse and neglect of consumers;*
3. *supporting consumers to live the best life they can*
4. *managing and preventing incidents, including the use of an incident management system.*

The service was found Non-compliant with Requirement (3)(d) following a Site Audit conducted 09 June 2021 to 11 June 2021 where it was found the service did not demonstrate effective risk management systems and practices, specifically in relation to identifying and responding to abuse and neglect of consumers. The Assessment Team’s report provided evidence of actions taken to address deficiencies identified, including, but not limited to:

* Regular meetings are held with care staff and address mandatory reporting for the Serious Incident Response Scheme as a permanent agenda item ensuring staff are aware of reporting requirements.
* Messages are sent to staff daily to ensure any information requiring reporting is sent to management. These messages change daily based on what management would like to address.
* Drafted a Clinical incident management procedure to ensure allegations of abuse are completed in line with the procedure, and information received as part of the enquiries are recorded on the consumer’s care plan.

The Assessment Team provided the following evidence and information collected through interviews, observations and documents which are relevant to my finding in relation to this Requirement:

* Management of high impact or high prevalence risks is supported through staff training relating to clinical excellence education and care staff risk management. Updates on consumers’ clinical incidents, such as falls, skin integrity and medication changes are provided to clinical and care staff through regular meeting forums.
* Staff sampled described what harm, abuse or neglect looks like and how to report an incident if they become aware. Staff said that if they noticed a consumer being harmed in any way, they would stop the activity, ensure the consumer was safe and report it to clinical staff for follow up.
* Policy and procedure documents provide guidance on supporting consumers to live the best life they can, ensuring their opinions are heard and any changes responded to. Where consumers choose to take risks, risks associated with the activity are discussed with the consumer and/or representative and a Dignity of risk form is completed.
* An Incident management system is in place to review clinical indicators. A Clinical indicators file is maintained and includes monthly analyses which assist to identify trends and improvement opportunities. A Significant incidents file demonstrated most incidents are escalated, followed up and reviewed with remedial action implemented.

For the reasons detailed above, I find Brightwater Care Group Limited, in relation to Brightwater Birralee, Compliant with Requirement (3)(d) in Standard 8 Organisational governance.

# Areas for improvement

There are no specific areas identified in which improvements must be made to ensure compliance with the Quality Standards. The provider is, however, required to actively pursue continuous improvement in order to remain compliant with the Quality Standards.